

**BLIC VOUCHER FOR PURCHASES AT
 SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. _____
 Bu. Vou. No. 903

U. S. COST REIMBURSABLE
 (Department, bureau, or establishment)

Voucher prepared at _____
 (Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To _____
 (Payee)

 (Address) (City) (State)

PAID BY
Encl # 27
 SAPC 17429
 COPY 1 OF 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				4,912.	92

PAYMENT:
 Complete
 Partial
 Final

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total \$ 4,912. 92

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

FOIA b3b

(Sign original only)

Date 7-9-57 *Payee _____
(not required when a like certificate is made by payee on attached bill or bills)
 Per _____ Title _____

Differences _____
 Amount verified; correct for 4,912 92
 (Signature or initials) *JAS*

Contract No. A101 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____
 By _____ Title _____
 Title _____ Date _____
 (Authorized Certifying Officer)

SIGN ORIGINAL ONLY

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
 { Cash, \$ _____, on _____, 19____ Payee _____
 (Sign original only)

* When a voucher is signed or receipted in the name of a company, the name of the company must be written in full, and the name of the person signing for the company must appear. For example, "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
 † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Public Voucher for Purchases and
 Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. COST REIMBURSABLE Sheet No. 2 of Bureau Voucher No. 903
 (Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
TICKET							
INVOICE							
CR MEMO	CHECK NO	PAYEE OR VENDOR NO					
A002936	7037	267				40.86	
A002936	7037	267				(.41)	
7863	7107	597				18.81	
7863	7107	597				(.38)	
						\$ <u>758.88</u>	